

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Chuck Fleischmann for Congress Committee, Inc.

Full Name (Last, First, Middle Initial)

A. Rosen, Jeffrey, , ,

Mailing Address 3201 NE 183rd St, Suite 2208

City

Aventura

State

FL

Zip Code

33180

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Triangle Financial Services

Occupation

Founder

Receipt For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02		22		2022

Transaction ID : SA11AI.23401

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 Campaign Contribution

Full Name (Last, First, Middle Initial)

B. Rosen, Jeffrey, , ,

Mailing Address 3201 NE 183rd St, Suite 2208

City

Aventura

State

FL

Zip Code

33180

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Triangle Financial Services

Occupation

Founder

Receipt For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		25		2022

Transaction ID : SA11AI.23536

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 Campaign Contribution

Full Name (Last, First, Middle Initial)

C. Shuler, Joseph, , ,

Mailing Address 184 Lower Brush Creek Rd

City

Fletcher

State

NC

Zip Code

28732

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self employed

Occupation

Consultant

Receipt For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		07		2022

Transaction ID : SA11AI.23486

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 Campaign Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶

3000.00

TOTAL This Period (last page this line number only)..... ▶